



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
239 Causeway Street
Boston, MA 02114
www.mass.gov/abcc

ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 067400002

CITY OR TOWN MATTAPOISETT

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: Rick's Tavern, Inc

DOING BUSINESS A Rick's

ADDRESS 35 COUNTY RD.

CITY/TOWN: MATTAPOISETT

STATE: MA

ZIP CODE: 02739

MANAGER: Cole, Richard E

TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

ONE FLOOR, WOODEN BLDG, TWO MAIN ROOMS, TWO RESTROOMS, ONE KITCHEN. BAR
LOCATED IN BACK ROOM. ENTRANCE AND EXIT ON EAST, WEST AND SOUTH SIDES

I hereby certify and swear under penalties of perjury that:

1. the renewed license will be of the same type for the same premises now licensed;
2. the licensee has complied with all laws of the Commonwealth relating to taxes; and
3. the premises are now open for business (If not explain below)

SIGNED BY

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

We the undersigned, attest that we are in possession (1) the certificate required by Chapter 304 of the Acts of 2004, signed by the building inspector and the head of the fire department for the above named license and (2) the certificate of liquor liability insurance required by Chapter 116 of the Acts of 2010.

Please Check Below:

APPROVED: ☐

DISAPPROVED: ☐

(If disapproved explain)

LOCAL LICENSING AUTHORITY

By:

DATE:

APPLICATION FOR RENEWAL MUST BE FILED BY LICENSEES DURING THE MONTH OF NOVEMBER (M.G.L. Ch. 138 § 16A)



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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 067400004

CITY OR TOWN MATTAPOISETT

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: NEIMAD CLUB HOME CORP.

DOING BUSINESS AS KNIGHT'S OF COLUMBUS

ADDRESS 57 FAIRHAVEN RD.

CITY/TOWN: MATTAPOISETT

STATE: MA

ZIP CODE: 02739

MANAGER: ALFERES, JAMES TYPE OF LICENSE: Club

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

BAR AND LOUNGE AREA ON FIRST FLOOR, TWO FLOOR BLDG, FIRST FLOOR LARGE HALL, SMALL SERVING KITCHEN, RESTROOM. BASEMENT WITH CLUBROOM AND MENS ROOM

I hereby certify and swear under penalties of perjury that:

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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 067400007

CITY OR TOWN MATTAPOISETT

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: RESERVATION GOLF CLUB INC.

DOING BUSINESS AS

ADDRESS 10 RESERVATION RD

CITY/TOWN: MATTAPOISETT

STATE: MA

ZIP CODE: 02739

MANAGER: O'BRIEN, ROBERT TYPE OF LICENSE: Club

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

TWO STORY BLDG, BAR, LOUNGE, SMALL KITCHEN, MENS AND LADIES ROOMS ON FIRST FLOOR, BAR, LOUNGE, FUNCTION HALL, PROSHOP, MENS AND LADIES ROOMS SECOND FLOOR

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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 067400009

CITY OR TOWN MATTAPOISETT

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: 13 WATER STREET GROUP

DOING BUSINESS AS THE INN ON SHIPYARD PARK

ADDRESS 13 WATER ST.

CITY/TOWN: MATTAPOISETT

STATE: MA

ZIP CODE: 02739

MANAGER: PERRY, ANDREA TYPE OF LICENSE: Innholder

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

THREE STORY WOODEN STRUCTURE. ENTRANCE AND EXIT ON WEST PORCH AND SOUTH SIDE. BAR LOCATED IN MAIN LOUNGE ON NORTH WALL. THREE DINING ROOMS; ONE ADDITIONAL BAR ON SCREENED PORCH WHICH IS OPERATED DURING THE SUMMER MONTHS

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OFF-PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 067400011

CITY OR TOWN MATTAPOISETT

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: Ed Lima's Wine & Spirits, Inc

DOING BUSINESS AS VILLAGE PACKAGE STORE

ADDRESS 2 & 4 COUNTY ROAD

CITY/TOWN: MATTAPOISETT

STATE: MA

ZIP CODE: 02739

MANAGER: Lima, Edward F

TYPE OF LICENSE: Package Store

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

TO EXPAND INTO THE REST OF EXISTING RETAIL AREA IN SAME BUILDING 2-4 COUNTY ROAD.

I hereby certify and swear under penalties of perjury that:

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TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

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OFF-PREMISESLICENSE RENEWAL APPLICATION

LICENSE NUMBER: 067400013

CITY OR TOWN MATTAPOISETT

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: BRETT D. SHERMAN

DOING BUSINESS A

ADDRESS 59 COUNTY ROAD

CITY/TOWN: MATTAPOISETT

STATE: MA

ZIP CODE: 02739

MANAGER: sherman, brett s

TYPE OF LICENSE: Package Store

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

APPROX 24X40 OF RETAIL SALES AREA AND A STORAGE AREA IN REAR OF BUILDING

I hereby certify and swear under penalties of perjury that:

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TELEPHONE NUMBER:

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OFF-PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 067400014

CITY OR TOWN MATTAPOISETT

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: HIKA CORPORATION

DOING BUSINESS AS MATTAPOISETT LIQUORS

ADDRESS 00062A FAIRHAVEN RD

CITY/TOWN: MATTAPOISETT

STATE: MA

ZIP CODE: 02739

MANAGER: PATEL, SAN JAY

TYPE OF LICENSE: Package Store

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

40'7 X 29'5 RETAIL AREA AND A COOLER WITH SEVEN COOLER DOORS. MAIN ENTRANCE
FACING ROUTE 6. SERVICE DOOR IN REAR

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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 067400015

CITY OR TOWN MATTAPOISETT

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: NICK'S HOMEMADE PIZZA HOUSE,LLC

DOING BUSINESS AS

ADDRESS 27 COUNTY ROAD

CITY/TOWN: MATTAPOISETT

STATE: MA

ZIP CODE: 02739

MANAGER: VRAKAS,DAPHNE TYPE OF LICENSE: Restaurant

CATEGORY: Wine and
Malt Regular

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

ONE STORY BLDG WITH DINING ROOM. COUNTER, COOKING AND PREP AREA BEHIND.
THREE DOORS, ONE FRONT, ONE BACK AND ONE SIDE DOOR THAT OPENS INTO WALK IN
COOLER. RESTROOMS

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EMPLOYER IDENTIFICATION NUMBER:

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DATE:



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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 067400020

CITY OR TOWN MATTAPOISETT

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: TOKYO RESTAURANT INC.

DOING BUSINESS AS TOKYO RESTAURANT

ADDRESS 143 FAIRHAVEN ROAD

CITY/TOWN: MATTAPOISETT

STATE: MA

ZIP CODE: 02739

MANAGER: CHEA, SARA

TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

2 STORY BLDG. ENTRANCE/EXIT SOUTH & WEST SIDES. TWO DINING ROOMS 1ST FLOOR, LOUNGE ON 1ST FLOOR; FULL KITCHEN, 2 RESTROOMS ON 1ST FLOOR.

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EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

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DATE:



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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 067400021

CITY OR TOWN MATTAPOISETT

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: AJN CORP.

DOING BUSINESS A MATTAPOISETT CHOWDER HOUSE AND TAVERN

ADDRESS 79 FAIRHAVEN ROAD

CITY/TOWN: MATTAPOISETT

STATE: MA

ZIP CODE: 02739

MANAGER: KORAN, MARK

TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

THIRTEEN TABLES SEATS FOUR. FIVE TABLES SEATS TWO AND FOUR TABLES SIT SIX.
REAR EXIT AND BASEMENT FOR STORAGE

I hereby certify and swear under penalties of perjury that:

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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 067400022

CITY OR TOWN MATTAPOISETT

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: Real Ventures Investments, LLC

DOING BUSINESS AS The South Coast Local

ADDRESS 81 FAIRHAVEN ROAD

CITY/TOWN: MATTAPOISETT

STATE: MA

ZIP CODE: 02739

MANAGER: Gibson, Sherry A

TYPE OF LICENSE: Restaurant

CATEGORY: Wine and
Malt Regular

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

RESTAURANT SERVING BREAKFAST, LUNCH & DINNER

I hereby certify and swear under penalties of perjury that:

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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 067400023

CITY OR TOWN MATTAPOISETT

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: JUDITH L. PASQUILL

DOING BUSINESS A TURK'S SEAFOOD, INC.

ADDRESS 83 MARION RD

CITY/TOWN: MATTAPOISETT

STATE: MA

ZIP CODE: 02739

MANAGER: PASQUILL, JUDITH TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

1 STORY BUILDING CONSISTING OF 2 DINING AREAS; BAR; BAR SERVICE AREA;
OUTDOOR PATIO SEATING; KITCHEN; WALK-IN COOLER; 4 RESTROOMS; RETAIL FISH
MARKET. THREE ENTRANCES/EXITS ON FRONT OF BUILDING 4 AT REAR OF BUILDING.

I hereby certify and swear under penalties of perjury that:

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DATE:



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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 067400025

CITY OR TOWN MATTAPOISETT

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: GOLF HOUSE, INC.

DOING BUSINESS AS

ADDRESS 5 BAY CLUB DRIVE

CITY/TOWN: MATTAPOISETT

STATE: MA

ZIP CODE: 02739

MANAGER: FLEMING, CRAIG TYPE OF LICENSE: Club
F

CATEGORY: All Alcohol

EMAIL ADDRESS:

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DESCRIPTION OF LICENSED PREMISES:

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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 067400027

CITY OR TOWN MATTAPOISETT

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: HOW ON EARTH LLC

DOING BUSINESS AS HOW ON EARTH

ADDRESS 62 MARION ROAD

CITY/TOWN: MATTAPOISETT

STATE: MA

ZIP CODE: 02739

MANAGER: BALDWIN,
MARGIE

TYPE OF LICENSE: Restaurant

CATEGORY: Wine and
Malt Regular

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

LOCAL ORGANIC FOOD STORE WITH RESTAURANT

I hereby certify and swear under penalties of perjury that:

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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 067400028

CITY OR TOWN MATTAPOISETT

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: YING DYNASTY OF MATTAPOISETT, INC

DOING BUSINESS AS YING DYNASTY II

ADDRESS 24 COUNTY RD

CITY/TOWN: MATTAPOISETT

STATE: MA

ZIP CODE: 02739

MANAGER: ZHAO, YING
SHANGQ

TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

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DESCRIPTION OF LICENSED PREMISES:

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ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 067400029

CITY OR TOWN MATTAPOISETT

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: TASTEBUDS, INC.

DOING BUSINESS AS

ADDRESS 42 MAIN ST.

CITY/TOWN: MATTAPOISETT

STATE: MA

ZIP CODE: 02739

MANAGER: LAREAU, CAROL TYPE OF LICENSE: Restaurant
D. C.

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

MULTI USE COMMERCIAL BLDG. W/ UNISEX BATHROOM

I hereby certify and swear under penalties of perjury that:

1. the renewed license will be of the same type for the same premises now licensed;
2. the licensee has complied with all laws of the Commonwealth relating to taxes; and
3. the premises are now open for business (If not explain below)

SIGNED BY

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

We the undersigned, attest that we are in possession (1) the certificate required by Chapter 304 of the Acts of 2004, signed by the building inspector and the head of the fire department for the above named license and (2) the certificate of liquor liability insurance required by Chapter 116 of the Acts of 2010.

Please Check Below:

APPROVED: ☐

DISAPPROVED: ☐

(If disapproved explain)

LOCAL LICENSING AUTHORITY

By:

DATE:

APPLICATION FOR RENEWAL MUST BE FILED BY LICENSEES DURING THE MONTH OF NOVEMBER (M.G.L. Ch. 138 § 16A)



The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
239 Causeway Street
Boston, MA 02114
www.mass.gov/abcc

ON PREMISES LICENSE RENEWAL APPLICATION

LICENSE NUMBER: 067400030

CITY OR TOWN MATTAPOISETT

APPLICATION FOR RENEWAL:

Annual

LICENSED FOR 2013

CLASS

YEAR

LICENSEE NAME: THE MATTAPOISETT RESTAURANT GROUP LLC

DOING BUSINESS AS THE SPEEDWELL TAP AND TABLE

ADDRESS 47 MAIN STREET

CITY/TOWN: MATTAPOISETT

STATE: MA

ZIP CODE: 02739

MANAGER: MELLO, JOHN T.

TYPE OF LICENSE: Restaurant

CATEGORY: All Alcohol

EMAIL ADDRESS:

PLEASE ALSO VISIT OUR WEBSITE AND ENTER YOUR EMAIL ADDRESS

DESCRIPTION OF LICENSED PREMISES:

MAIN FLOOR IS 2200 SQ FT. . . BAR/LOUNGE AREA, SOUTH SIDE CONSISTS OF DINING ROOM . . . KITCHEN IS LOCATED IN THE NORTHEAST CORNER . . . TWO ENTRANCES/EXITS ON THE MAIN FLOOR. . . HANDICAP ACCESSIBLE ENTRANCE/EXIT ON THE MAIN ST. SIDE OF BUILDING AND ONE ON THE MIDDLE STREET SIDE . . . BASEMENT FOR STORAGE

I hereby certify and swear under penalties of perjury that:

1. the renewed license will be of the same type for the same premises now licensed;
2. the licensee has complied with all laws of the Commonwealth relating to taxes; and
3. the premises are now open for business (If not explain below)

SIGNED BY

Individual, Partner or Authorized Corporate Officer

DATE:

TELEPHONE NUMBER:

EMPLOYER IDENTIFICATION NUMBER:

(Note: **NOT** Individual Social Security Number)

We the undersigned, attest that we are in possession (1) the certificate required by Chapter 304 of the Acts of 2004, signed by the building inspector and the head of the fire department for the above named license and (2) the certificate of liquor liability insurance required by Chapter 116 of the Acts of 2010.

Please Check Below:

APPROVED: ☐

DISAPPROVED: ☐

(If disapproved explain)

LOCAL LICENSING AUTHORITY

By:

DATE:
